

**UNITED STATES BANKRUPTCY COURT**  
**OFFICE OF THE CLERK**  
**DISTRICT OF MARYLAND**

Richard C. Donovan  
Clerk

[www.mdb.uscourts.gov](http://www.mdb.uscourts.gov)

U.S. Courthouse  
101 West Lombard Street  
Baltimore, Maryland 21201  
(410) 962-2688

September 10, 2001

**TO: ALL PARTIES PAYING FOR COURT FEES AND SERVICES**  
**RE: ACCEPTING BANK CARD PAYMENTS FOR COURT SERVICES**

**GUIDELINES:**

1. As of July 1, 2001, this bankruptcy court began a credit card acceptance program in the Baltimore office. On October 1, 2001 we will permit payment for court fees and services using VISA, MasterCard, Novus/Discover, Diners Club and American Express bank cards in the Greenbelt Division. **(Bank cards will not be accepted from current debtors.)**
2. Requests for services and charges to the bank cards must be made in person by the cardholder or via the forms list below.

**IN PERSON:** A customer can present their bank card at the intake counter at the time services are rendered. No authorization form is necessary.

**BLANKET AUTHORIZATION FORM**

1. This form may be obtained at the court's intake section, located at:

Garmatz United States Court House 101 W. Lombard, 8 <sup>th</sup> Floor Baltimore, Maryland	United States Court House 6500 Cherrywood Lane, Suite 300 Greenbelt, Maryland
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Or electronically from the Home page of our web site, [www.mdb.uscourts.gov](http://www.mdb.uscourts.gov).

2. Law firms, partnerships and sole practitioners may present or mail a Blanket Authorization Form to the court which will permit any approved employee of the firm to request services and to charge a specified bank card account number for those services.
3. This form must be typed and contain the **original** signature of the cardholder.
4. This form will be maintained by the court in a secured area.

**ONE-TIME AUTHORIZATION FORM**

1. Customers who infrequently pay for court fees and services may choose to mail this form or send it via courier with their attached request or paperwork.
2. The form must be typed and contain the **original** signature of the cardholder.
3. This form will be maintained by the court in a secured area.

**RECEIPTS:** Cash register and bank card receipts will be returned or mailed to persons making payment by bank card.

Further questions about bank card payments should be addressed to:  
Sharon McGuire, Financial Administrator (410) 962-7479

**UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF MARYLAND  
BANK CARD BLANKET AUTHORIZATION FORM**

I hereby authorize the U.S. Bankruptcy Court to charge the bank card listed below for payment of fees, costs, and expenses which are incurred by the authorized users listed below. I understand if a document requiring a fee is received without the fee, the court will automatically charge the account number listed on this form. Initial installment payments will be charged at the time of filing the petition. I certify that I am authorized to sign this form on behalf of my law firm.

**Credit Cardholder Name:** \_\_\_\_\_

**Card Type:**    \_\_\_\_\_ **AMERICAN EXPRESS**    \_\_\_\_\_ **DISCOVER**    \_\_\_\_\_ **DINERS CLUB**  
                  \_\_\_\_\_ **MASTER CARD**                    \_\_\_\_\_ **VISA**

**Account Number:** \_\_\_\_\_ **AMEX CID#:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Names and Signatures of individuals authorized to use account number listed above for payment of fees, costs, or expenses:**

_____ <b>Name</b>	_____ <b>Signature</b>
_____ <b>Name</b>	_____ <b>Signature</b>
_____ <b>Name</b>	_____ <b>Signature</b>
_____ <b>Name</b>	_____ <b>Signature</b>

**Name of Law Firm:** \_\_\_\_\_  
(If sole practitioner, type or print your name)

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**INSTRUCTIONS FOR COMPLETING FORM: THIS FORM MUST BE TYPED, FILLED OUT COMPLETELY, AND DELIVERED TO THE U.S. BANKRUPTCY COURT FOR THE DISTRICT OF MARYLAND, ROOM 9625, 101 WEST LOMBARD STREET, BALTIMORE, MARYLAND 21201, or SUITE 300, 6500 CHERRYWOOD LANE, GREENBELT, MARYLAND 20770.** A new form must be submitted to the court upon any change to: name, address, telephone number, authorized user(s), account number, expiration date, etc. It is the responsibility of the cardholder to notify the court if a card has been canceled or stolen. This form will remain in effect until the expiration date of the card, or specifically revoked in writing.